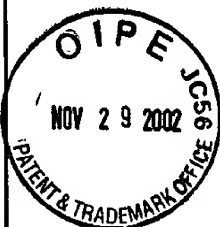


# NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number (Optional)  
389014



In re Application of

Curtis A. Vock et al

Application Number

09/657,111

Filed

07 September 2000

For

EVENT AND SPORT PERFORMANCE METHODS AND SYSTEMS

Group Art Unit  
2863

Examiner  
Tung S. Lau

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, 24 September 2002, rejecting the following claims: 1-12.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 320.

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ 160.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. \_\_\_\_\_. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed.

☒ attorney or agent of record.

☐ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) \_\_\_\_.

Curtis A. Vock

Signature

Curtis A. Vock, Reg. No. 38,356

Typed or printed name

11/22/02

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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12/02/2002 WABDELRI 00000044 09657111

01 FC:2401

160.00 OP



AF 2863  
PATENT \$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Curtis A. Vock et al.  
Application No. 09/657,111  
Filed 07 September 2000  
Title EVENT AND SPORT PERFORMANCE METHODS AND SYSTEMS  
Group./A.U. 2863  
Examiner Tung S. Lau  
Docket No. 389014

Assistant Commissioner for Patents  
Washington, D.C. 20231

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CERTIFICATE OF MAILING

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1. Transmittal – 1 page
2. Fee Transmittal – 1 page + 1 copy
3. Check in the amount of \$160.00
4. Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences – 1 page
5. Certificate of Mailing – 1 page
6. Pre-addressed postcard

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Heather Fedor

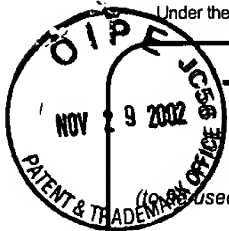
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PTO/SB/21 (08-00)

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## TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

|   |                             |                               |        |
|---|-----------------------------|-------------------------------|--------|
| <b>Application Number</b>                       | 09/657,111                  |                               |        |
|   | <b>Filing Date</b>          | 07 September 2000             |        |
|   | <b>First Named Inventor</b> | Curtis A. Vock et al.         |        |
|   | <b>Group Art Unit</b>       | 2863                          |        |
|   | <b>Examiner Name</b>        | Tung S. Lau                   |        |
| <b>Total Number of Pages in This Submission</b> | 5                           | <b>Attorney Docket Number</b> | 389014 |

### ENCLOSURES (check all that apply)

|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Certificate of Mailing</b><br><b>Return Postcard</b> |
| <b>Remarks</b>   |   |   |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                                |                                       |
|--------------------------------|---------------------------------------|
| <b>Firm or Individual name</b> | Curtis A. Vock<br>Lathrop & Gage L.C. |
| <b>Signature</b>               | <i>Curtis A. Vock</i>                 |
| <b>Date</b>                    | 11/22/02                              |

### CERTIFICATE OF MAILING

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|---|----------------------|-------------|------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 22 November 2002 |                      |             |            |
| <b>Typed or printed name</b>  | Heather Fedor        |             |            |
| <b>Signature</b>  | <i>Heather Fedor</i> | <b>Date</b> | 11/22/2002 |

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| <div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 2px solid black; border-radius: 50%; padding: 10px; margin-right: 10px; text-align: center;"> <b>PTO</b><br/> <b>NOV 29 2002</b><br/> <b>UNITED STATES PATENT AND TRADEMARK OFFICE</b> </div> <div> <h1 style="margin: 0;">FREE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p> <p><input checked="" type="checkbox"/> Applicant claiming small entity status.</p> </div> </div> |      | Complete if Known    |                       |
|  |      | Application Number   | 09/657,111            |
|  |      | Filing Date          | 07 September 2000     |
|  |      | First Named Inventor | Curtis A. Vock et al. |
|  |      | Examiner Name        | Tung S. Lau           |
| Group / Art Unit   | 2863 |                      |                       |
| TOTAL AMOUNT OF PAYMENT (\$)   |      | 160                  |                       |
| Attorney Docket No.  |      | 389014               |                       |

| <p style="text-align: center; font-weight: bold;">METHOD OF PAYMENT (check one)</p> <p> <input checked="" type="checkbox"/> Check            <input type="checkbox"/> Credit card            <input type="checkbox"/> Money            <input type="checkbox"/> Other<br/> <input type="checkbox"/> Deposit Account       </p> <div style="margin-top: 10px;">         Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">12-0600</span> </div> <div style="margin-top: 10px;">         Deposit Account Name: <span style="border: 1px solid black; padding: 2px 50px;">LATHROP &amp; GAGE LC</span> </div> <p style="font-size: small; margin-top: 10px;">         The Commissioner is authorized to: (check all that apply)<br/> <input type="checkbox"/> Charge fees indicated below            <input checked="" type="checkbox"/> Credit any overpayments<br/> <input type="checkbox"/> Charge Any Additional Fee Required during pendency of this application<br/> <input type="checkbox"/> Charge Fee(s) indicated below, <b>except for the filing fee</b> to the above-identified deposit account       </p>   | <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p><b>1. BASIC FILING FEE</b></p> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>740</td><td>2001</td><td>370</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>510</td><td>2003</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>740</td><td>2004</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td><b>(\$)</b> 0</td> </tr> </tbody> </table> <p><b>2. EXTRA CLAIM FEES</b></p> <table style="width: 100%; font-size: small;"> <tr> <td>Total Claims</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>X</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> </tr> <tr> <td>Independent Claims</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>X</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td>X</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> <td>=</td> <td><span style="border: 1px solid black; padding: 0 10px;">0</span></td> </tr> </table> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td><b>(\$)</b> 0</td> </tr> </tbody> </table> <p style="font-size: x-small; margin-top: 5px;">**or number previously paid, if greater; For Reissues, see above</p> | Large Entity Fee Code | Large Entity Fee (\$)  | Small Entity Fee Code  | Small Entity Fee (\$)  | Fee Description | Fee Paid   | 1001 | 740 | 2001 | 370 | Utility filing fee                  |  | 1002 | 330 | 2002 | 165 | Design filing fee                                      |  | 1003 | 510 | 2003 | 255 | Plant filing fee          |  | 1004 | 740   | 2004 | 370   | Reissue filing fee                     |  | 1005 | 160  | 2005 | 80   | Provisional filing fee                                 |  | <b>SUBTOTAL (1)</b> |        |      |        |   | <b>(\$)</b> 0 | Total Claims | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =    | <span style="border: 1px solid black; padding: 0 10px;">0</span> | X                                      | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =    | <span style="border: 1px solid black; padding: 0 10px;">0</span> | Independent Claims | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =                                       | <span style="border: 1px solid black; padding: 0 10px;">0</span> | X    | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =    | <span style="border: 1px solid black; padding: 0 10px;">0</span> | Multiple Dependent                     |  |      |       | X    | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =                                       | <span style="border: 1px solid black; padding: 0 10px;">0</span> | Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description                        | Fee Paid | 1202 | 18  | 2202 | 9   | Claims in excess of 20 |     | 1201 | 84  | 2201 | 42  | Independent claims in excess of 3      |  | 1203 | 280 | 2203 | 140 | Multiple dependent claim, if not paid |  | 1204 | 84    | 2204 | 42    | ** Reissue independent claims over original patent |  | 1205 | 18  | 2205 | 9  | ** Reissue claims in excess of 20 and over original patent |  | <b>SUBTOTAL (2)</b> |       |      |     |                                    | <b>(\$)</b> 0 |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
|---|---|-----------------------|--|--|--|-----------------|--|------|-----|------|-----|-------------------------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|---------------------------|--|------|-------|------|-------|--|--|------|------|------|------|--|--|---------------------|--------|------|--------|---|---------------|--------------|--|------|--|--|--|------|--|--------------------|--|---|--|------|--|------|--|--|--|------|-------|------|--|---|--|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|------|-----|------|-----|------------------------|-----|------|-----|------|-----|--|--|------|-----|------|-----|---------------------------------------|--|------|-------|------|-------|--|--|------|-----|------|----|--|--|---------------------|-------|------|-----|------------------------------------|---------------|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|---------------------|--|--|--|--|-----------------|
| Large Entity Fee Code   | Large Entity Fee (\$)   | Small Entity Fee Code | Small Entity Fee (\$)  | Fee Description  | Fee Paid   |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1001  | 740   | 2001                  | 370  | Utility filing fee   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1002  | 330   | 2002                  | 165  | Design filing fee  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1003  | 510   | 2003                  | 255  | Plant filing fee   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1004  | 740   | 2004                  | 370  | Reissue filing fee   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1005  | 160   | 2005                  | 80   | Provisional filing fee   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| <b>SUBTOTAL (1)</b>   |   |                       |  |  | <b>(\$)</b> 0  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| Total Claims  | <span style="border: 1px solid black; padding: 0 10px;">0</span>  | =                     | <span style="border: 1px solid black; padding: 0 10px;">0</span> | X  | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =               | <span style="border: 1px solid black; padding: 0 10px;">0</span> |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| Independent Claims  | <span style="border: 1px solid black; padding: 0 10px;">0</span>  | =                     | <span style="border: 1px solid black; padding: 0 10px;">0</span> | X  | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =               | <span style="border: 1px solid black; padding: 0 10px;">0</span> |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| Multiple Dependent  |   |                       |  | X  | <span style="border: 1px solid black; padding: 0 10px;">0</span> | =               | <span style="border: 1px solid black; padding: 0 10px;">0</span> |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| Large Entity Fee Code   | Large Entity Fee (\$)   | Small Entity Fee Code | Small Entity Fee (\$)  | Fee Description  | Fee Paid   |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1202  | 18  | 2202                  | 9  | Claims in excess of 20   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1201  | 84  | 2201                  | 42   | Independent claims in excess of 3  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1203  | 280   | 2203                  | 140  | Multiple dependent claim, if not paid                                      |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1204  | 84  | 2204                  | 42   | ** Reissue independent claims over original patent                         |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1205  | 18  | 2205                  | 9  | ** Reissue claims in excess of 20 and over original patent                 |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| <b>SUBTOTAL (2)</b>   |   |                       |  |  | <b>(\$)</b> 0  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| <p style="text-align: center; font-weight: bold;">FEE CALCULATION (continued)</p> <p><b>3. ADDITIONAL FEES</b></p> <table style="width: 100%; font-size: small;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>400</td><td>2252</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>920</td><td>2253</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,440</td><td>2254</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,960</td><td>2255</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td>160</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,280</td><td>2453</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,280</td><td>2501</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>460</td><td>2502</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>620</td><td>2503</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>740</td><td>2809</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>740</td><td>2810</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>740</td><td>2801</td><td>370</td><td>Request For Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request For expedited examination of a design application</td><td></td></tr> <tr> <td colspan="5">Other fee (specify) _____</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>*Reduced by Basic Filing Fee Paid</b></td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>SUBTOTAL (3)</b></td> <td><b>(\$)</b> 160</td> </tr> </tbody> </table> |   | Large Entity Fee Code | Large Entity Fee (\$)  | Small Entity Fee Code  | Small Entity Fee (\$)  | Fee Description | Fee Paid   | 1051 | 130 | 2051 | 65  | Surcharge - late filing fee or oath |  | 1052 | 50  | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet |  | 1053 | 130 | 1053 | 130 | Non-English specification |  | 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination |  | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |  | 1805                | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |               | 1251         | 110  | 2251 | 55   | Extension for reply within first month |  | 1252 | 400  | 2252               | 200  | Extension for reply within second month |  | 1253 | 920  | 2253 | 460  | Extension for reply within third month |  | 1254 | 1,440 | 2254 | 720  | Extension for reply within fourth month |  | 1255                  | 1,960                 | 2255                  | 980                   | Extension for reply within fifth month |          | 1401 | 320 | 2401 | 160 | Notice of Appeal       | 160 | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal |  | 1403 | 280 | 2403 | 140 | Request for oral hearing              |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding      |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable                           |  | 1453                | 1,280 | 2453 | 640 | Petition to revive - unintentional |               | 1501 | 1,280 | 2501 | 640 | Utility issue fee (or reissue) |  | 1502 | 460 | 2502 | 230 | Design issue fee |  | 1503 | 620 | 2503 | 310 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 740 | 2809 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 740 | 2810 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 740 | 2801 | 370 | Request For Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request For expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | <b>*Reduced by Basic Filing Fee Paid</b> |  |  |  |  |  | <b>SUBTOTAL (3)</b> |  |  |  |  | <b>(\$)</b> 160 |
| Large Entity Fee Code   | Large Entity Fee (\$)   | Small Entity Fee Code | Small Entity Fee (\$)  | Fee Description  | Fee Paid   |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1051  | 130   | 2051                  | 65   | Surcharge - late filing fee or oath  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1052  | 50  | 2052                  | 25   | Surcharge - late provisional filing fee or cover sheet                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1053  | 130   | 1053                  | 130  | Non-English specification  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1812  | 2,520   | 1812                  | 2,520  | For filing a request for reexamination                                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1804  | 920*  | 1804                  | 920*   | Requesting publication of SIR prior to Examiner action                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1805  | 1,840*  | 1805                  | 1,840*   | Requesting publication of SIR after Examiner action                        |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1251  | 110   | 2251                  | 55   | Extension for reply within first month                                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1252  | 400   | 2252                  | 200  | Extension for reply within second month                                    |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1253  | 920   | 2253                  | 460  | Extension for reply within third month                                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1254  | 1,440   | 2254                  | 720  | Extension for reply within fourth month                                    |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1255  | 1,960   | 2255                  | 980  | Extension for reply within fifth month                                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1401  | 320   | 2401                  | 160  | Notice of Appeal   | 160  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1402  | 320   | 2402                  | 160  | Filing a brief in support of an appeal                                     |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1403  | 280   | 2403                  | 140  | Request for oral hearing   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1451  | 1,510   | 1451                  | 1,510  | Petition to institute a public use proceeding                              |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1452  | 110   | 2452                  | 55   | Petition to revive - unavoidable   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1453  | 1,280   | 2453                  | 640  | Petition to revive - unintentional   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1501  | 1,280   | 2501                  | 640  | Utility issue fee (or reissue)   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1502  | 460   | 2502                  | 230  | Design issue fee   |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1503  | 620   | 2503                  | 310  | Plant issue fee  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1460  | 130   | 1460                  | 130  | Petitions to the Commissioner  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1807  | 50  | 1807                  | 50   | Processing fee under 37 CFR 1.17(q)  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1806  | 180   | 1806                  | 180  | Submission of Information Disclosure Stmt                                  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 8021  | 40  | 8021                  | 40   | Recording each patent assignment per property (times number of properties) |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1809  | 740   | 2809                  | 370  | Filing a submission after final rejection (37 CFR § 1.129(a))              |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1810  | 740   | 2810                  | 370  | For each additional invention to be examined (37 CFR § 1.129(b))           |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1801  | 740   | 2801                  | 370  | Request For Continued Examination (RCE)                                    |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| 1802  | 900   | 1802                  | 900  | Request For expedited examination of a design application                  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| Other fee (specify) _____   |   |                       |  |  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| <b>*Reduced by Basic Filing Fee Paid</b>  |   |                       |  |  |  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |
| <b>SUBTOTAL (3)</b>   |   |                       |  |  | <b>(\$)</b> 160  |                 |  |      |     |      |     |                                     |  |      |     |      |     |  |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                     |        |      |        |   |               |              |  |      |  |  |  |      |  |                    |  |   |  |      |  |      |  |  |  |      |       |      |  |   |  |                       |                       |                       |                       |  |          |      |     |      |     |                        |     |      |     |      |     |  |  |      |     |      |     |                                       |  |      |       |      |       |  |  |      |     |      |    |  |  |                     |       |      |     |                                    |               |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |                 |

|                   |                |                                  |              |
|-------------------|----------------|----------------------------------|--------------|
| SUBMITTED BY      |                | Complete (if applicable)         |              |
| Name (Print/Type) | Curtis A. Vock | Registration No. Attorney/Agent) | 38,356       |
| Signature         |                | Telephone                        | 720-931-3000 |
|                   |                | Date                             | 11/22/02     |

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